

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
PM 1-19
2009 JAN 20 PM 3:22

COMMITTEE NAME (Must be same as on Statement of Organization)

Himes for House

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Dena G. Himes

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1720

5 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Dena G. Himes
SIGNATURE OF PERSON FILING REPORT

(319) 465-4201
TELEPHONE

1/12/2009
DATE SIGNED

I AM FILING A January 19, 2009 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

\$ 3,034.57

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

100.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 3,134.57

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2,991.63

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 142.94

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 28.89

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

**MONETARY
EXPENDITURES**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/17/08	ID# CK# 1015	Telegraph Herald 801 Bluff Street P. O. Box 688 Dubuque, Iowa 52004-0688	Campaign Ads	\$ 373.75
10/22/08	ID# CK# 1016	Monticello Express 111 Grand Street P. O. Box 191 Monticello, IA 52310	Campaign Ads	1290.00
10/22/08	ID# CK# 1017	The Stevens Co Suite 320 Dubuque, IA 52001	Campaign Ads	250.00
11/09/08	ID# CK# 1018	Cascade Pioneer P. O. Box #9 Cascade, IA 52033-0009	Campaign Ads	833.63
11/12/08	ID# CK# 1019	Midland Times 301 Webster Wyoming, IA 52362	Campaign Ads	325.50
11/14/08	ID# CK# 367882	Woodland Communications a Division of the Telegraph Herald Communications	Refund for Campaign Ads	<81.25>
11/19/08	ID# CK# 1020	Anamosa Publications PO Box 108 Anamosa, IA 52205	Campaign ad thankyou	16.00
11/19/08	ID# CK# 1021	Midland Times 301 Webster Wyoming, IA 52362	Campaign ad thankyou	18.00
SUB-TOTAL				\$ 3156.13
TOTAL (if last page of this schedule)				\$:

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/19/2008	ID# CK# 1022	Cascade Pioneer Po Box #9 Cascade, IA 52033-0009	Campaign ads	55.40 \$
11/19/2008	ID# CK# 1023	Monticello Express 111 Grand Street PO Box 191 Monticello, IA 52310	Campaign ads	\$ 45.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 100.40
TOTAL (if last page of this schedule)				\$ 3256.53

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Himes for House

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SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/30/08	Dena Himes 720 West Sixth Street Monticello, Iowa 52310	Candidate	Cost of coffee with candidates @ Gounds and Goodies	\$ 28.89	<input type="checkbox"/>
11/3/08	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Automated Calls	44.68	<input type="checkbox"/>
10/20/08	Republican Party of Iowa 621 E 9th Des Moines, IA 50309		TV Production	5,293.91	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 5367.48

TOTAL (if last
page of this
schedule) \$ 5367.48

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)